Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MINNESOTA	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

06/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
	•		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ire identification (for nple, your driver's ise or passport).	Andrew First name  John Middle name	First name  Middle name
	iden	g your picture tification to your ting with the trustee.	Marshall Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	youi num Indi	the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number	xxx-xx-7322	

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)		☐ I have not used any business name or EINs.  Business name(s)  EIN			
5.	Where you live	5581 154th Lane NW		If Debtor 2 lives at a different address:			
		Ramsey, MN 55303  Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code			
		Anoka					
		County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	_	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	_	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7 ☐ Chapter 11							
		□с	napter 12						
		<b>■</b> C	napter 13						
8.	How you will pay the fee		about how yo	ou may pay. Typic attorney is submi	ally, if you are paying the fee yo	k with the clerk's office in your local court fourself, you may pay with cash, cashier's chalf, your attorney may pay with a credit care	neck, or money		
					<b>Ilments.</b> If you choose this option (Official Form 103A).	on, sign and attach the Application for Indiv	iduals to Pay		
			I request that but is not req	nt my fee be waiv uired to, waive yo	red (You may request this option for fee, and may do so only if you	n only if you are filing for Chapter 7. By law ur income is less than 150% of the official n installments). If you choose this option, yo	poverty line that		
						cial Form 103B) and file it with your petition			
9.	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye			Mhan	Casa number			
			District		When When				
			District District		when	Case number Case number			
			District		vviien	Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	□ No	Go to I	ine 12.					
	residence?	■ Ye	s. Has yo	our landlord obtair	ned an eviction judgment agains	t you?			
				No. Go to line 12	<u>2</u> .				
			_	Yes. Fill out <i>Inition</i>		Judgment Against You (Form 101A) and fil	e it with this		

Debtor 1 Andrew John Marshall

12.	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.	ace	
	A colo propriotorchia is a	⊔ Yes.	INGIII	e and location of busine		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numi	Number, Street, City, State & ZIP Code		
	it to this petition.		Chec	ck the appropriate box t	o describe your business:	
				Health Care Busines	ss (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defi	ned in 11 U.S.C. § 101(53A))	
				Commodity Broker (	as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as	proceed you are o	under Suchoosing v stateme	<i>lbchapter V so that it ca</i> to proceed under Subc	urt must know whether you are a small business debtor or a debtor choosing to an set appropriate deadlines. If you indicate that you are a small business debtor or hapter V, you must attach your most recent balance sheet, statement of operations, tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.	
	defined by 11 U.S. C. § 1182(1)?	■ No.		not filing under Chapte	r 11.	
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.	
		☐ Yes.			, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ubchapter V of Chapter 11.	
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or Any F	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to		What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where i	is the property?		
	urgent repairs?					

Debtor 1 Andrew John Marshall

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Andrew John Mar	shall		Case numb	Der (if known)		
Par	t 6: Answer These Quest	ions for Rep	orting Purposes				
16.	What kind of debts do you have?			onsumer debts? Consumer debts are de sonal, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an		
		[	☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				usiness debts? Business debts are debtestment or through the operation of the bu			
		[	☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c. S	State the type of debts you o	owe that are not consumer debts or busine	ess debts		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter	7. Go to line 18.			
	Do you estimate that after any exempt			Do you estimate that after any exempt provailable to distribute to unsecured creditors	operty is excluded and administrative expenses s?		
	property is excluded and administrative expenses	[	□ No				
	are paid that funds will be available for	[	☐Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	☐ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	□ 50,001-100,000		
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to	<b>\$</b> 0 - \$50	0,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	be worth?		- \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			11 - \$500,000 11 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
		_ ' '	11 - \$500,000 11 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Par	:7: Sign Below						
For	you	I have exar	mined this petition, and I dec	clare under penalty of perjury that the info	rmation provided is true and correct.		
				7, I am aware that I may proceed, if eligible elief available under each chapter, and I o	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankruptcy and 3571.	case can result in fines up	, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			w John Marshall John Marshall of Debtor 1	Signature of Debt	tor 2		
		Executed o	n October 19, 2022	Executed on			
			MM / DD / YYYY		M / DD / YYYY		

Debtor 1 Andrew John Mar	rshall	Cas	Case number (if known)			
For your attorney, if you are represented by one			e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter			
If you are not represented by an attorney, you do not need to file this page.	for which the person is eligible. I also certify that	at I have delivered to the	debtor(s) the notice required by 11 U.S.C. § 342(b) wledge after an inquiry that the information in the			
	/s/ Wesley W. Scott	Date	October 19, 2022			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Wesley W. Scott 0264787					
	LifeBack Law Firm, PA Firm name					
	13 7th Avenue South Saint Cloud, MN 56301 Number, Street, City, State & ZIP Code					

Email address

wes@lifebacklaw.com

Contact phone **320-252-0330** 

0264787 MN Bar number & State

Fill	n this information to identify your case:		
Deb	or 1 Andrew John Marshall		
Doh	First Name Middle Name Last Name  Of 2		
	se if, filing)  First Name  Middle Name  Last Name		
Unit	ed States Bankruptcy Court for the: DISTRICT OF MINNESOTA		
Cas (if kn	numberwn)	_	ck if this is an nded filing
Off	icial Form 106Sum		
Su	nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
infor	complete and accurate as possible. If two married people are filing together, both are equally responsible nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amenoriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Part	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	35,472.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	35,472.00
Part	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$	4,851.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	52,657.33
	Your total liabilitie	s \$	57,510.33
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,590.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,090.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with y	our other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	r a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the	nis box and	submit this form to

Official Form 106Sum

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,063.75

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	8,646.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	8,648.00

Fill in this info	ormation to identify your	case and this filing:			
Debtor 1	Andrew John Ma				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	DISTRICT OF MINNESO	ГА		
Case number					☐ Check if this is an
					amended filing
Official F	orm 106A/B				
Schedu	ıle A/B: Prop	erty			12/15
hink it fits best. nformation. If m Answer every qu	Be as complete and accuratore space is needed, attachustion.	ate as possible. If two married a a separate sheet to this form	nce. If an asset fits in more than of dipeople are filing together, both in. On the top of any additional page.  You Own or Have an Interest In	are equally responsible for su	pplying correct
			uilding, land, or similar property?	,	
_	, .	e interest in any residence, b	unung, ianu, or sinnar property :		
No. Go to F					
☐ Yes. Wher	e is the property?				
Part 2: Descri	be Your Vehicles				
			icles, whether they are regist le G: Executory Contracts and l		hicles you own that
omeone else (	ilives. Il you lease a verilo	ile, also report it ori <i>scriedul</i>	e G. Executory Contracts and t	ліехрігей Leases.	
B. Cars, vans,	trucks, tractors, sport u	tility vehicles, motorcycle	s		
□ No					
■ Yes					
- 165					
3.1 Make:	Chevy	Who has an intere	est in the property? Check one	Do not deduct secured cla	
Model:	Malibu	Debtor 1 only		the amount of any secure Creditors Who Have Clair	
Year:	2017	☐ Debtor 2 only		Current value of the	Current value of the
Approxin	nate mileage: 135	,000 Debtor 1 and De	ebtor 2 only	entire property?	portion you own?
Other inf	ormation:	☐ At least one of t	he debtors and another		
		Check if this is (see instructions)	s community property	\$8,850.00	\$8,850.00
3.2 Make:	Harley Davidson	Who has an intere	est in the property? Check one	Do not deduct secured cla the amount of any secure	
Model:	FLXTRS	Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
Year:	2015	Debtor 2 only		Current value of the	Current value of the
		,000 Debtor 1 and De	•	entire property?	portion you own?
	ormation:	At least one of t	he debtors and another		
Some	damage		community property	\$12,000.00	\$12,000.00
		(see instructions)			

Debtor 1 Andrew John Marshall			arshall	Case number (if known)				
3.3	Model:	Harley Davids FXS Shovel H 1981		Who has an interest in the property? Check one  ■ Debtor 1 only  □ Debtor 2 only	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: laims Secured by Property.		
	Approximat Other inform		N/A	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?		
				Check if this is community property (see instructions)	\$2,000.00	\$2,000.00		
3.4	-	Chevrolet Camero 2-28		Who has an interest in the property? Check one  Debtor 1 only	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: laims Secured by Property.		
	Year: Approximate	-	N/A	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?		
				☐ Check if this is community property (see instructions)	\$4,000.00	\$4,000.00		
Part	3: Describe	Your Personal a	nd Household Ite	ems terest in any of the following items?		\$26,850.00  Current value of the portion you own?  Do not deduct secured		
		ribe	furniture, linens	, china, kitchenware ds, Furnishings, and Minor Appliances, ch	nristmas	claims or exemptions.		
E		levisions and ra	nes, cameras, m	eo, stereo, and digital equipment; computers, printenedia players, games				
				amera, 1- Nintendo Switch	9	\$500.00		
E		ntiques and figur her collections, r		prints, or other artwork; books, pictures, or other ar llectibles	t objects; stamp, coin, or t	paseball card collections;		
			gic Cards			\$20.00		

D	Alidiew John Marshan	
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments	and kayaks; carpentry tools;
	□ No	
	Yes. Describe	
	4.0. 1.14.0. 1.4.11	¢50.00
	1 - Snowboard, 1 Racketball set	\$50.00
10.	<ul> <li>Firearms</li> <li>Examples: Pistols, rifles, shotguns, ammunition, and related equipment</li> </ul>	
	■ No	
	☐ Yes. Describe	
	Clathaa	
11.	Clothes     Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□No	
	Yes. Describe	
	Clathing	\$500.00
	Clothing	
12.	<ul> <li>Jewelry</li> <li>Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gems,</li></ul>	rold silver
	□ No	gold, silver
	■ Yes. Describe	
	1- Gold Necklace, 2 - Gold Rings, 3 -Gold Bracelets, 1 Gold	\$2,000.00
	Wedding Ring	Ψ2,000.00
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses  ☐ No	
	■ Yes. Describe	
	100. 2000180	
	Dog "Lucy"	\$1,000.00
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	□ No	
	Yes. Give specific information	
	1 - Push Lawnmower, Shovels/Rakes, Misc. Hand & Power Tools	\$1,000.00
	1 - Pusii Lawiiiilowei, Siloveis/Rakes, Misc. Hailu & Powei 100is	φ1,000.00
		<u> </u>
1.5	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	
	for Part 3. Write that number here	\$6,570.00
Pa	art 4: Describe Your Financial Assets	
	o you own or have any legal or equitable interest in any of the following?	Current value of the
		portion you own?  Do not deduct secured
		claims or exemptions.
10	Coch	
10.	. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petiti	on
	□ No	
	■ Vee	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Andrew John Marshall		naii	Case number (if known)			
				Cash _	\$2.00	
	institutions.			unts; certificates of deposit; shares in credit unions, brokerage houses, with the same institution, list each.	and other similar	
	s			Institution name:		
		17.1.	Checking	St. Cloud FCU	\$600.00	
		17.2.	Checking	Union Building Trades FCU	\$0.00	
		17.3.	Prepaid Debit	OneVanilla Prepaid Visa Card	\$150.00	
		17.4.	Checking	Affinity Plus FCU	\$0.00	
Exai ■ No				kerage firms, money market accounts		
Exal No Yes  9. Non- joint No Yes  20. Gove Neg Non-	publicly traded sto t venture  s. Give specific info ernment and corpo otiable instruments -negotiable instrum	ock and  ormation Nar  orate bor include pents are	Institution or issuer national interests in incorporation about themme of entity:  Index and other negotion of the personal checks, cash those you cannot transabout them	name: rated and unincorporated businesses, including an interest in an	LLC, partnership, and	
Exal  No Yes  19. Non-joint No Yes  20. Gove Neg Non Yes  21. Retir	publicly traded stop to venture  s. Give specific information and corportiable instruments in growth and corportiable instruments. Give specific information and corportiable instruments in I the corporation in the corporat	ock and  ormation Nar  orate bor include pents are ormation a lssu  account	Institution or issuer national interests in incorporation about themme of entity:  Indicate and other negotion bersonal checks, cash those you cannot transplant them user name:	mame:  wrated and unincorporated businesses, including an interest in an  """  """  """  """  """  """  """	LLC, partnership, and	
Exal  No Yes  19. Non- joint No Yes  20. Gove Non- No Yes  21. Retir Exal	publicly traded stop to venture  s. Give specific information and corportiable instruments in growth and corportiable instruments. Give specific information and corportiable instruments in I the corporation in the corporat	ock and  ormation Nar  orate bor include pents are ormation a Issu account RA, ERIS	Institution or issuer national interests in incorporation about them	rated and unincorporated businesses, including an interest in an % of ownership: tiable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	LLC, partnership, and	
Exal  No Yes  19. Non- joint No Yes  20. Gove Neg Non- No Yes  21. Retir Exal	publicly traded stoper serious information and corporation instruments in Give specific information in the serious information in the serious interests in t	ock and  ormation Nar  orate bor include pents are ormation a Issu account RA, ERIS	Institution or issuer national interests in incorporation about them	rated and unincorporated businesses, including an interest in an  """  """  """  """  """  """  """		
Exal  No Yes  19. Non- joint No Yes  20. Gove Neg Non- No Yes  21. Retir Exal	publicly traded stoper serious information and corporation instruments in Give specific information in the serious information in the serious interests in t	ock and  ormation Nar  orate bor include pents are  ormation a Issu account RA, ERIS t separat	Institution or issuer national interests in incorporation about them	rated and unincorporated businesses, including an interest in an  % of ownership:  tiable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	LLC, partnership, and \$0.00	
■ No	publicly traded stoper serious information and corporation instruments in Give specific information in the serious information in the serious interests in t	ock and  ormation Nar  orate bor include pents are  ormation a Issu account RA, ERIS t separat	Institution or issuer notinterests in incorporation about them	rated and unincorporated businesses, including an interest in an  % of ownership:  tiable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.  03(b), thrift savings accounts, or other pension or profit-sharing plans  Institution name:  x3 Pensions w/Union	\$0.00	

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No

Debtor 1	Andrew Jo	ohn Marshall		C	ase number (if known)	
☐ Yes	3		Institution na	me or individual:		
_	uities (A contrac	t for a periodic paym	ent of money to you, either for li	fe or for a number of	years)	
■ No □ Yes	3	Issuer name and de	scription.			
		ation IRA, in an acc ), 529A(b), and 529	ount in a qualified ABLE prog b)(1).	ram, or under a qua	lified state tuition progra	nm.
	5	Institution name and	d description. Separately file the	records of any intere	sts.11 U.S.C. § 521(c):	
■ No	•	future interests in information about th	property (other than anything	listed in line 1), and	rights or powers exerci	sable for your benefit
Exar ■ No	mples: Internet d		secrets, and other intellectua ites, proceeds from royalties and		ts	
27. <b>Lice</b> n <i>Exar</i> ■ No	nses, franchise mples: Building p	s, and other genera	I intangibles enses, cooperative association l	noldings, liquor licens	es, professional licenses	
Money o	or property owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	efunds owed to		em, including whether you alread	dy filed the returns an	d the tax years	
			Anticipated 2022 Tax Refu to the date of filing	ınds; pro-rated		\$0.00
Exar ■ No	ly support nples: Past due s. Give specific i		/, spousal support, child support	t, maintenance, divord	ce settlement, property set	itlement
Exar	<i>mples:</i> Unpaid w benefits;	unpaid loans you ma	ance payments, disability benef ade to someone else	its, sick pay, vacation	pay, workers' compensa	tion, Social Security
■ Yes	s. Give specific		arned Unpaid Wages			\$1,300.00
		<u>                                     </u>	arried Oripaid Wages			Ψ1,300.30
	ests in insurand Inples: Health, di		nce; health savings account (H	SA); credit, homeown	er's, or renter's insurance	
	s. Name the insu	urance company of e Company na	ach policy and list its value. ame:	Beneficiar	y:	Surrender or refund value:

De	ו וטוט	Andrew John Marshall	<i>y</i>
	If you a	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to rene has died.	ceive property because
ļ	☐ Yes.	Give specific information	
	Claims Examp	against third parties, whether or not you have filed a lawsuit or made a demand for payment bles: Accidents, employment disputes, insurance claims, or rights to sue	
		Describe each claim	
	Other o	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights	to set off claims
		Describe each claim	
	Any fin ■ No	ancial assets you did not already list	
		Give specific information	
36.		he dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$2,052.00
Par	t 5: De:	scribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
_		own or have any legal or equitable interest in any business-related property?	
	_	to Fall 0.	
Par	t 6: De	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. ou own or have an interest in farmland, list it in Part 1.	
46.		own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	_	Go to Part 7.  Go to line 47.	
	00		
Par	t 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
	Examp	have other property of any kind you did not already list?  les: Season tickets, country club membership	
	■ No □ Yes.	Give specific information	
54.	Add t	he dollar value of all of your entries from Part 7. Write that number here	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

Deb	tor 1 Andrew John Marshall		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$26,850.00		
57.	Part 3: Total personal and household items, line 15	\$6,570.00		
58.	Part 4: Total financial assets, line 36	\$2,052.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$35,472.00	Copy personal property total	\$35,472.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$35.472.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Andrew John Ma	rshall		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case number				
(if known)				Check if this is an amended filing

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt	

	☐ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	portion you own  Copy the value from Check only one box for each exemption.		Specific laws that allow exemption			
		Copy the value from Schedule A/B						
	2017 Chevy Malibu 135,000 miles Line from Schedule A/B: 3.1	\$8,850.00		\$3,999.00	11 U.S.C. § 522(d)(5)			
	Line IIIIII Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit				
	2015 Harley Davidson FLXTRS 55,000 miles	\$12,000.00		\$4,450.00	11 U.S.C. § 522(d)(2)			
	Some damage Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit				
	2015 Harley Davidson FLXTRS 55,000 miles	\$12,000.00	•	\$7,550.00	11 U.S.C. § 522(d)(5)			
	Some damage Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit				
	1981 Harley Davidson FXS Shovel Head N/A miles	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit				
	1980 Chevrolet Camero 2-28 N/A	\$4,000.00		\$1,876.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: <b>3.4</b>			100% of fair market value, up to any applicable statutory limit				

Debtor 1 Andrew John Marshall			Case number (if known)	
Brief description of the property and line of Schedule A/B that lists this property	n Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B			
Household Goods, Furnishings, a Minor Appliances, christmas	and \$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
decorations Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
2-TVs, 1- Stereo, 1- Laptop Computer, Cell Phones (making	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
payments), 1- Camera, 1- Nintend Switch Line from <i>Schedule A/B</i> : <b>7.1</b>	o		100% of fair market value, up to any applicable statutory limit	
Clothing	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <b>11.1</b>			100% of fair market value, up to any applicable statutory limit	
1- Gold Necklace, 2 - Gold Rings, -Gold Bracelets, 1 Gold Wedding	\$2,000.00	•	\$1,875.00	11 U.S.C. § 522(d)(4)
Ring Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
Dog "Lucy" Line from Schedule A/B: 13.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
Line from Schedule AVD. 13.1			100% of fair market value, up to any applicable statutory limit	
Pension: x3 Pensions w/Union Line from Schedule A/B: 21.1	\$0.00			11 U.S.C. § 522(d)(10)(E)
Line Irom S <i>criedule A/B</i> . 21.1			100% of fair market value, up to any applicable statutory limit	
401(k) w/Union Line from Schedule A/B: 21.2	\$0.00			11 U.S.C. § 522(d)(10)(E)
Line IIIII Schedule AVD. 21.2			100% of fair market value, up to any applicable statutory limit	
Annuity: w/Union	\$0.00			11 U.S.C. § 522(d)(10)(E)
Line from Schedule A/B: 21.3			100% of fair market value, up to any applicable statutory limit	
Roth IRA w/Union Line from Schedule A/B: 21.4	\$0.00			11 U.S.C. § 522(d)(10)(E)
Line IIom Schedule AVD. 21.4			100% of fair market value, up to any applicable statutory limit	
<ol> <li>Are you claiming a homestead exemp (Subject to adjustment on 4/01/25 and e</li> <li>No</li> </ol>	very 3 years after that for ca	ises fil	ŕ	,
<ul><li>☐ Yes. Did you acquire the property o</li><li>☐ No</li></ul>	overed by the exemption wi	thin 1	215 days before you filed this case	?
☐ Yes				

		r case:				
Debtor 1	Andrew John M	arshall				
	First Name	Middle Name Las	t Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Las	t Name			
United States Bank	ruptcy Court for the:	DISTRICT OF MINNESOTA				
Case number						
(if known)					☐ Chec	k if this is an
					amer	nded filing
Official Form	106D					
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		h D	_	
Schedule L	): Creditors	Who Have Claims Se	curea	by Property	<u>/</u>	12/15
		f two married people are filing together, bo out, number the entries, and attach it to thi				
1. Do any creditors ha	ave claims secured by	your property?				
□ No. Check the control of the c	nis box and submit th	is form to the court with your other sche	edules. You	ı have nothing else to	report on this form.	
Yes. Fill in a	II of the information b	pelow.				
Part 1: List All	Secured Claims					
-		nore than one secured claim, list the creditor	separately	Column A	Column B	Column C
for each claim. If more	e than one creditor has	a particular claim, list the other creditors in P		Amount of claim	Value of collateral	Unsecured
much as possible, list	the claims in alphabetic	al order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
	Credit Union	Describe the property that secures the cl		\$4,851.00	\$8,850.00	\$0.00
Creditor's Name		2017 Chevy Malibu 135,000 mile	s			
Attn: Bankr	uptcv					
3030 1st St		As of the date you file, the claim is: Check apply.	all that			
Saint Cloud	I, MN 56301	Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Who owes the debt	2 Chaak ana	Disputed				
Debtor 1 only	or Check one.	Nature of lien. Check all that apply.  An agreement you made (such as mortg	age or secil	red		
Debtor 2 only		car loan)	age of secui	eu		
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit	•			
☐ Check if this clair community debt		Other (including a right to offset)				
	Opened					
	06/17 Last		0044			
Date debt was incur	red Active 10/22	Last 4 digits of account number	0041			
Add the dollar value	ie of your entries in Co	olumn A on this page. Write that number h	ere:	\$4,85	1.00	
	o or your cittings ill bl	January on this page. Write that hulliber if	0.0.	φ4,00	1.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	n to identify your c	ase:					
Debtor 1 A	ndrew John Mars						
	rst Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing) Fi	rst Name	Middle Name	Last Name				
United States Bankrup	otcy Court for the:	DISTRICT OF MINNESO	DTA				
Case number							
(if known)						Check	if this is an
					_	amend	ed filing
Official Form 10							
Schedule E/F:	Creditors W	ho Have Unsecu	red Claims				12/15
Schedule D: Creditors W	/ho Have Claims Secution Page to this page	red Leases (Official Form 10 ired by Property. If more spa e. If you have no information	ace is needed, copy the Pa	rt you need, fill it out,	number the	entries ir	the boxes on the
Part 1: List All of	Your PRIORITY Uns	secured Claims					
1. Do any creditors ha	ve priority unsecured	I claims against you?					
☐ No. Go to Part 2.							
<b>.</b>							
Yes.							
2. List all of your prior identify what type of possible, list the clair	claim it is. If a claim has ns in alphabetical orde	. If a creditor has more than o s both priority and nonpriority a r according to the creditor's na ticular claim, list the other cre	amounts, list that claim here ame. If you have more than to	and show both priority a	nd nonprior	ity amount	s. As much as
List all of your prior identify what type of possible, list the clair Part 1. If more than of	claim it is. If a claim has ms in alphabetical order one creditor holds a par	s both priority and nonpriority a r according to the creditor's na	amounts, list that claim here ame. If you have more than to ditors in Part 3.	and show both priority a wo priority unsecured cla	nd nonprior	ity amount	s. As much as nuation Page of
List all of your prior identify what type of possible, list the clair Part 1. If more than of	claim it is. If a claim has ms in alphabetical order one creditor holds a par	s both priority and nonpriority are according to the creditor's naticular claim, list the other cre	amounts, list that claim here ame. If you have more than to ditors in Part 3.	and show both priority a	nd nonprior	ity amount	s. As much as
List all of your prior identify what type of possible, list the clair Part 1. If more than of (For an explanation of the possible).	claim it is. If a claim has ms in alphabetical order one creditor holds a par	s both priority and nonpriority ar r according to the creditor's na ticular claim, list the other cre ee the instructions for this form	amounts, list that claim here ame. If you have more than to ditors in Part 3.	and show both priority a wo priority unsecured cla	nd nonprior	ity amount	s. As much as nuation Page of Nonpriority
List all of your prior identify what type of possible, list the clair Part 1. If more than of (For an explanation of the priority Creditor)      Internal Revenue:	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service 's Name	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number	and show both priority a wo priority unsecured cla  Total claim	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
List all of your prior identify what type of possible, list the clair Part 1. If more than of (For an explanation of the priority Creditor Centralized)	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service 's Name Insolvency	s both priority and nonpriority ar r according to the creditor's na ticular claim, list the other cre ee the instructions for this form	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number	and show both priority a wo priority unsecured cla  Total claim	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
List all of your prior identify what type of possible, list the clair Part 1. If more than of (For an explanation of the priority Creditor Centralized PO Box 734	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service 's Name Insolvency 16	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the control of the control	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number	and show both priority a wo priority unsecured cla  Total claim	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
List all of your prior identify what type of possible, list the clair Part 1. If more than of (For an explanation of the priority Creditor Centralized PO Box 734 Philadelphia	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service 's Name Insolvency	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the content of the content	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number	and show both priority a wo priority unsecured cla  Total claim  \$1.00	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
List all of your prior identify what type of possible, list the clair Part 1. If more than of (For an explanation of the priority Creditor Centralized PO Box 734 Philadelphia	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so venue Service s Name Insolvency 6 a, PA 19101-7346 City State Zip Code	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the content of the content	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?	and show both priority a wo priority unsecured cla  Total claim  \$1.00	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
List all of your prioridentify what type of possible, list the clair Part 1. If more than of (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Number Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Creditor Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Centralized PO Box 734 Philadelphia Street (For an explanation of the Priority Centralized PO Box 734 Philadelphia Street (For an explanation of the Point	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so venue Service s Name Insolvency 6 a, PA 19101-7346 City State Zip Code	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the content of the date y	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  you file, the claim is: Check	and show both priority a wo priority unsecured cla  Total claim  \$1.00	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
List all of your prior identify what type of possible, list the clair Part 1. If more than of the control	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so venue Service s Name Insolvency 6 a, PA 19101-7346 City State Zip Code	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the company of the date y  Contingent	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  you file, the claim is: Check	and show both priority a wo priority unsecured cla  Total claim  \$1.00	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
2. List all of your prioridentify what type of possible, list the clair Part 1. If more than of (For an explanation of Priority Creditor Centralized PO Box 734 Philadelphia Number Street of Who incurred the Debtor 1 only	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service s Name Insolvency 6 a, PA 19101-7346 City State Zip Code debt? Check one.	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the companient of the date you contingent of the disputed of th	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  you file, the claim is: Check	and show both priority a wo priority unsecured cla  Total claim  \$1.00	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
2. List all of your prioridentify what type of possible, list the clair Part 1. If more than of the control of	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service s Name Insolvency 6 a, PA 19101-7346 City State Zip Code debt? Check one.	s both priority and nonpriority ar according to the creditor's naticular claim, list the other cree the instructions for this form  Last 4 digits of  When was the company and the date you contingent  Unliquidated  Type of PRIORI	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  You file, the claim is: Check	and show both priority a wo priority unsecured cla  Total claim  \$1.00	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
2. List all of your prioridentify what type of possible, list the clair Part 1. If more than to (For an explanation of Priority Creditor Centralized PO Box 734 Philadelphi:  Number Street of Who incurred the Debtor 1 only  Debtor 2 only  At least one of the	claim it is. If a claim has ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service s Name Insolvency 66 a, PA 19101-7346 City State Zip Code debt? Check one.	As of the date y  Contingent  Unliquidated  Disputed  Type of PRIORI	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  You file, the claim is: Check	and show both priority a wo priority unsecured class and claim  \$1.00  all that apply	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
2. List all of your prioridentify what type of possible, list the clair Part 1. If more than of the control of	claim it is. If a claim has ms in alphabetical order ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service Is Name Insolvency 6 a, PA 19101-7346 City State Zip Code debt? Check one.	As of the date y  Contingent  Unliquidated  Type of PRIORI  Type debt  Taxes and ce	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  You file, the claim is: Check  TY unsecured claim:  apport obligations  ertain other debts you owe the	and show both priority a wo priority unsecured claw pr	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount
2. List all of your prioridentify what type of possible, list the clair Part 1. If more than to (For an explanation of Priority Creditor Centralized PO Box 734 Philadelphi:  Number Street of Who incurred the Debtor 1 only  Debtor 2 only  At least one of the	claim it is. If a claim has ms in alphabetical order ms in alphabetical order one creditor holds a par of each type of claim, so yenue Service Is Name Insolvency 6 a, PA 19101-7346 City State Zip Code debt? Check one.	As of the date y  Contingent  Unliquidated  Type of PRIORI  Type debt  Taxes and ce	amounts, list that claim here ame. If you have more than to ditors in Part 3.  In in the instruction booklet.)  account number  debt incurred?  You file, the claim is: Check  TY unsecured claim:  poport obligations  ertain other debts you owe the eath or personal injury while y	and show both priority a wo priority unsecured claw pr	nd nonprior	ity amount the Contir	s. As much as nuation Page of  Nonpriority amount

Debto	r 1 Andrew John Marshall	Case number (if known)					
2.2	MN Dept of Revenue	Last 4 digits of account number \$1.00	\$1.00	\$0.00			
	Priority Creditor's Name Attn: Denise Jones PO Box 64447	When was the debt incurred?					
	Saint Paul, MN 55164-0047  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
٧	Vho incurred the debt? Check one.	Contingent					
I	Debtor 1 only	□ Unliquidated					
[	Debtor 2 only	□ Disputed					
[	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
[	☐ At least one of the debtors and another	☐ Domestic support obligations					
[	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government					
	s the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated					
	No	☐ Other. Specify					
	☐Yes						
4. Lis un tha Pa	secured claim, list the creditor separately for each cl an one creditor holds a particular claim, list the other art 2.	alphabetical order of the creditor who holds each claim. If a creditor has more that aim. For each claim listed, identify what type of claim it is. Do not list claims already increditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1.	. If more age of			
4.1	Advantage Collection  Nonpriority Creditor's Name	Last 4 digits of account number		\$27.00			
	495 2nd Ave SE Cambridge, MN 55008	When was the debt incurred?	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts					
	■ No □ Yes	Other. Specify     Unsecured					
		— Other. Openity	<u> </u>				

Debtor 1 Andrew John Marshall		Case number (if known)			
4.2	Allina Health	Last 4 digits of account number	8958	\$1,479.76	
	Nonpriority Creditor's Name PO BOX 77008	When was the debt incurred?	7/17/2022		
	Minneapolis, MN 55480				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	Пол			
		☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:		
	_	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other Specify Medical			
4.3	Allina Health	Last 4 digits of account number		\$228.86	
	Nonpriority Creditor's Name 2925 Chicago Ave Minneapolis, MN 55407	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Medical			
4.4	Amex	Last 4 digits of account number	4783	\$2,544.00	
	Nonpriority Creditor's Name	_	Opened 02/20 Last Active		
	Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	10/02/22		
	El Paso, TX 79998	_			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:		
	At least one of the debtors and another	Student loans	a oranii.		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	agreement of diverse that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		

Debtor 1 Andrew John Marshall		Case number (if known)		
4.5	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	6066	\$840.00
	Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634	When was the debt incurred?	Opened 07/17 Last Active 10/07/22	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	CareCredit Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	PO BOX 960061 Orlando, FL 32896-0061	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.7	CareCredit Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	PO Box 960061 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		

Debto	Andrew John Marshall	Ca	ase number (if known)	
4.8	Centerpoint Energy	Last 4 digits of account number	0220	\$0.00
	Nonpriority Creditor's Name PO Box 1144	When was the debt incurred?		
	Minneapolis, MN 55440-1144  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ion agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	Other. Specify Unsecured		
4.9	Centracare	Last 4 digits of account number	5995	\$36.87
	Nonpriority Creditor's Name 1406 6th Ave N	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 2 only  Debtor 1 and Debtor 2 only	<u> </u>		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured of	laim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ion agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1	Delata Dental of MN		0235	\$170.00
0	Nonpriority Creditor's Name	Last 4 digits of account number		\$170.00
	500 Washington Ave S. Suite 2060	When was the debt incurred?		
	Minneapolis, MN 55415 Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ion agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Dental		

Debtor 1 Andrew John Marshall		Case number (if known)			
4.1	First National Bank	Last 4 digits of account number	6971	\$22,200.00	
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 3128 Omaha, NE 68103 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim	Opened 03/13 Last Active 9/19/22 is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  Student loans	d claim:		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not		
	Yes	Other. Specify Credit Card	1		
4.1	FNBO Nonpriority Creditor's Name	Last 4 digits of account number	8772	\$715.00	
	PO BOX 3331 Omaha, NE 68103 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
	debt Is the claim subject to offset?  ■ No	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not		
	Yes	Other. Specify Unsecured			
4.1	HCMC Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00	
	PO Box 1238 Minneapolis, MN 55440	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	u Ciaiili:		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify			

Debtor	1 Andrew John Marshall	Case number (if known)		
4.1	lHealth	Last 4 digits of account number	4690	\$442.00
<u>·</u>	Nonpriority Creditor's Name PO BOX 860596	When was the debt incurred?	8/15/2022	
	Minneapolis, MN 55486 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1	Infinite health Collaborative	Last 4 digits of account number		\$0.00
5	Nonpriority Creditor's Name			
	PO Box 860596	When was the debt incurred?		
	Minneapolis, MN 55480  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 0.0 , 0.0 0.0	or or one an that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.1	Midwest Radiology	Last 4 digits of account number		\$205.00
6	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ203.00
	PO Box 1259 Dept. #16597	When was the debt incurred?		
	Oaks, PA 19456			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	ı Ciaiii.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	iation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		

Andrew John Marshall		Case number (if known)			
MNGI	Last 4 digits of account number		\$108		
Nonpriority Creditor's Name PO BOX 14829 Minneapolic MN 55414	When was the debt incurred?	8/15/2022			
Minneapolis, MN 55414 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharir	g plans, and other similar debts			
■ No	Other. Specify Medical	g plans, and other similar debts			
	- Other. Specify				
Navient Solutions Inc	Last 4 digits of account number	1129	\$2,304		
Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 9500	When was the debt incurred?	Opened 08/13 Last Active 9/19/22			
Wilkes-Barre, PA 18773 Number Street City State Zip Code	As of the date you file, the claim	is. Chack all that annly			
Who incurred the debt? Check one.	As of the date you me, the claim	<b>з.</b> Спеск ан шасарру			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated ☐ Disputed				
Debtor 1 and Debtor 2 only					
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	Other. Specify				
	Educationa	ıl			
Navient Solutions Inc Nonpriority Creditor's Name	Last 4 digits of account number	1129	\$1,808		
Attn: Bankruptcy P.O. Box 9500	When was the debt incurred?	Opened 08/10 Last Active 9/19/22			
Wilkes-Barre, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
_	Contingent				
Debtor 1 only	☐ Contingent ☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
At least one of the debtors and another	Student loans				
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not			
•					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			

Debtor	1 Andrew John Marshall		Case number (if known)		
4.2	Navient Solutions Inc	Last 4 digits of account number	1129	\$1,762.00	
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 9500 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 08/11 Last Active 9/19/22		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	☐ Other. Specify	.1		
		Educationa	ll .		
4.2 1	Navient Solutions Inc  Nonpriority Creditor's Name	Last 4 digits of account number	1129	\$1,486.00	
	Attn: Bankruptcy P.O. Box 9500 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 09/12 Last Active 9/19/22		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	$\square$ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify			
		Educationa	l		
4.2 2	Navient Solutions Inc Nonpriority Creditor's Name	Last 4 digits of account number	1129	\$784.00	
	Attn: Bankruptcy P.O. Box 9500	When was the debt incurred?	Opened 08/13 Last Active 9/19/22		
	Wilkes-Barre, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	■ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
		Educationa	ıl		

Debto	r 1 Andrew John Marshall	Case number (if known)			
4.2	Navient Solutions Inc	Last 4 digits of account number	1129	\$502.00	
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 9500 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 06/12 Last Active 9/19/22		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	I claim:		
	At least one of the debtors and another		i Ciaiiii.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a separeport as priority claims</li></ul>	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify			
	<b>—</b> 166	Educationa	1		
10					
4.2	Reliance Recoveries  Nonpriority Creditor's Name	Last 4 digits of account number		\$1,011.84	
	PO Box 29227 Minneapolis, MN 55429	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Unsecured			
4.2 5	Saint Cloud Credit Union  Nonpriority Creditor's Name	Last 4 digits of account number	0060	\$957.00	
	Attn: Bankruptcy 3030 1st Street South Saint Cloud, MN 56301	When was the debt incurred?	Opened 01/15 Last Active 10/22		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	-		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other Specify Check Cred	lit Or Line Of Credit		

Debto	or 1 Andrew John Marshall	Case number (if known)			
4.2	State Farm Payment Plan	Last 4 digits of account number	7805	\$135.00	
	Nonpriority Creditor's Name PO BOX 52265 Phoenix, AZ 85072	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Unsecured			
4.2 7	Syncb/Mills Fleet Farm	Last 4 digits of account number	5501	\$10,309.00	
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 04/18 Last Active		
	Po Box 965060	When was the debt incurred?	10/22		
	Orlando, FL 32896	_			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	<u> </u>				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed	d alaba.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:		
	☐ Check if this claim is for a community debt	_			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	Synchrony Bank/Care Credit	Last 4 digits of account number	5312	\$2,602.00	
	Nonpriority Creditor's Name  Attn: Bankruptcy Dept		Opened 07/22 Last Active		
	Po Box 965064	When was the debt incurred?	10/22		
	Orlando, FL 32896	_			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed	d claim:		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a Ciaiiii.		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other. Specify Charge Acc	count		

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims	01		01	_	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2.00
					Total Claim
Total	6f.	Student loans	6f.	\$	8,646.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	44,011.33
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	52,657.33

i ili ili tilis ililoitila	Fill in this information to identify your case:			
Debtor 1	Andrew John Ma	rshall		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	DISTRICT OF MINNESO	ATC	
Case number				
(if known)				☐ Check if th
(,				amended

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Pathlight Property Managment 6500 International Pkwy Suite 100 Plano, TX 75093	Residential Lease
2.2	Verizon Wireless BK Admin 500 Technology Drive Suite 550 Weldon Springs, MO 63304	Services and Devices

Fill in this info	rmation to identify your	case:			
Debtor 1	Andrew John Mar				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	DISTRICT OF MINNESO	ОТА		
Case number (if known)					☐ Check if this is an
					amended filing
Official E	orm 106H				
	e H: Your Cod	obtore			40/45
Scriedule	en. Tour Cou	EDIOI S			12/15
our name and	umber the entries in the case number (if known). have any codebtors? (If )	. Answer every question.	-		op of any Additional Pages, write
□ No ■ Yes					
	he last 8 years, have you alifornia, Idaho, Louisiana,				rty states and territories include )
■ No. Go t	to line 3.				
☐ Yes. Did	l your spouse, former spou	ise, or legal equivalent live	e with you at the time?		
in line 2 ag	gain as a codebtor only it D), Schedule E/F (Official	that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	mn 1: Your codebtor Number, Street, City, State and Zli	P Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:
687	nne Marie Marshall Brianna Drive Unit 2 ell, MN 56377			■ Schedule D, □ Schedule E/F □ Schedule G _ Saint Cloud Cre	-, line

	in this information to	o identify your ca Andrew Joh								
De	DIOI I	Andrew Jon	n warshan			-				
	btor 2 buse, if filing)	-				_				
Uni	ited States Bankrup	tcy Court for the	: DISTRICT OF MINNE	SOTA		_				
	se number nown)			-			Check if this is:  An amende  A supplement	nt showing		
$\cap$	fficial Form	1061							ollowing date:	
			am a				MM / DD/ Y	YYY		
	chedule I:		OME sible. If two married peo	ula ana filimu ta math	ou (Dobt	4	Dahtan O\ hat	h	-11	12/15
spo atta	use. If you are sep ch a separate shee	arated and you	are married and not filir r spouse is not filing wi On the top of any additi	ith you, do not inclu	de infori	nation a	bout your spo	use. If mo	ore space is	needed,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	or non-fil	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed	■ Employed			☐ Employed			
		. ,	☐ Not employed			☐ Not employed				
	employers.		Occupation	Electrician						
	Include part-time, self-employed wo		Employer's name	Hunt Electric Co	orp.					
	Occupation may in or homemaker, if		Employer's address	7900 Chicago A Bloomington, N		0				
			How long employed to	here? May 20	22					
Pai	rt 2: Give Det	tails About Mor	nthly Income							
	mate monthly inco		ate you file this form. If	you have nothing to r	eport for	any line,	write \$0 in the	space. Inc	lude your nor	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the informatio	n for all e	mployer	s for that perso	n on the lir	nes below. If	you need
						Fo	r Debtor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	5,850.00	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	5.850.00	\$	N/A	

				For I	Debtor 1	For Debtor 2 or non-filing spouse		
	Copy	y line 4 here	4.	\$	5,850.00	\$	N/A	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,170.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$_	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$_	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$_	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$_	N/A	
	5g.	Union dues	5g.	\$	90.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	· \$ —	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	1,260.00	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,590.00	\$	N/A	
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				•		
	OL	monthly net income.	8a.	\$	0.00	\$_	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	90	\$	0.00	¢	NI/A	
	04		8c. 8d.	\$ 	0.00	\$_ \$	N/A	
	8d. 8e.	Unemployment compensation Social Security	8e.	\$ 	0.00	\$ 	N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$	0.00	\$	N/A	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	N/A	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	4	+ \$_		<b>N/A</b> = \$	4,590.00
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depend				Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	4,590.00
			_				Combin monthly	ed income
13.	Do y₀ □	ou expect an increase or decrease within the year after you file this form  No.	?					
		Yes. Explain: His hours are an average worked;						

Fill	in this information to identify your case:				
Deb	tor 1 Andrew John Marshall		Check	if this is:	
				n amended filing	
	tor 2buse, if filing)			supplement show 3 expenses as of t	ing postpetition chapter he following date:
Unit	ed States Bankruptcy Court for the: DISTRICT OF MINNESOTA		<u> </u>	MM / DD / YYYY	
	· ,				
	e number nown)				
Of	fficial Form 106J				
So	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are principle. If more space is needed, attach another sheet to this fo nber (if known). Answer every question.				
Par 1.	Describe Your Household Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	<ul><li>□ No</li><li>□ Yes. Debtor 2 must file Official Form 106J-2, Expenses for</li></ul>	or Separate Housel	nold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				Yes
					□ No □ Yes
					□ res □ No
					☐ Yes
					□ No
•	Da como como como de desde				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est exp	imate your expenses as of your bankruptcy filing date unless you lenses as of a date after the bankruptcy is filed. If this is a supple plicable date.				
	lude expenses paid for with non-cash government assistance if y	vou know			
the	value of such assistance and have included it on <i>Schedule I: Yo</i> ficial Form 106I.)			Your expe	nses
4.	The rental or home ownership expenses for your residence. Inc	clude first mortgage			1 770 00
	payments and any rent for the ground or lot.		4. \$	-	1,770.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		10.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. \$ 4d. \$		15.00 0.00
5.	Additional mortgage payments for your residence, such as home	e equity loans	5. \$		0.00

ebtor 1	Andrew	John Marshall	Case num	nber (if known)	
	4!				
. <b>Utili</b> 6a.	ties:	heat, natural gas	6a.	¢	240.00
6b.	-		6b.	·	
		ver, garbage collection		·	210.00
6c. 6d.	•	, cell phone, Internet, satellite, and cable services	6c.	· ·	200.00
		ecify: Streaming Services	6d.	·	20.00
		ekeeping supplies	7.	·	530.00
		hildren's education costs	8.	·	0.00
	-	ry, and dry cleaning	9.	·	120.00
		roducts and services	10.		90.00
		ntal expenses	11.	\$	90.00
	•	Include gas, maintenance, bus or train fare.	10	¢	460.00
	not include ca		12.	· -	_
		clubs, recreation, newspapers, magazines, and bo		·	105.00
		ributions and religious donations	14.	\$	22.00
	irance.				
		surance deducted from your pay or included in lines 4		•	
	Life insura		15a.	· ·	0.00
	Health ins		15b.	·	0.00
15c.	Vehicle ins	surance	15c.	\$	143.00
15d.	Other insu	rance. Specify:	15d.	\$	0.00
		clude taxes deducted from your pay or included in line	s 4 or 20.		
Spe	cify: Vehic	le registration	16.	\$	15.00
		ease payments:			
17a.	Car payme	ents for Vehicle 1	17a.	\$	0.00
		ents for Vehicle 2	17b.	\$	0.00
17c.	Other. Spe	ecify:	17c.	\$	0.00
17d.	Other, Spe	ecify:	17d.	\$	0.00
. You	r payments	of alimony, maintenance, and support that you did	not report as	-	
ded	ucted from	your pay on line 5, Schedule I, Your Income (Officia	al Form 106I). 18.	\$	0.00
		you make to support others who do not live with		\$	0.00
Spe	cify:		19.		
. Oth	er real prope	erty expenses not included in lines 4 or 5 of this fo	rm or on Schedule I: Yo	our Income.	
20a.	Mortgages	on other property	20a.	\$	0.00
20b.	Real estate	e taxes	20b.	\$	0.00
20c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
	er: Specify:	Pet Expenses		+\$	50.00
. •	CI. Opcony.	1 et Expenses		Γ	30.00
. Calc	culate your r	monthly expenses			
22a.	Add lines 4	through 21.		\$	4,090.00
22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$	
22c	Add line 22a	a and 22b. The result is your monthly expenses.		s ———	4,090.00
					7,000.00
	-	nonthly net income.			
23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	4,590.00
23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	4,090.00
23c.	Subtract ye	our monthly expenses from your monthly income.			F00.00
		is your monthly net income.	23c.	\$	500.00
		-			
		in increase or decrease in your expenses within th			
		u expect to finish paying for your car loan within the year or do	you expect your mortgage	payment to increase of	or decrease because of a
		terms of your mortgage?			
□ Y	'es.	Explain here:			

Fill in this infor	mation to identify your	case:				
Debtor 1	Andrew John Ma	rshall				
	First Name	Middle Name	La	st Name		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	La	st Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOT	A			
Case number						
(if known)						Check if this is an
						amended filing
You must file the	is form whenever you fi	n connection with a bankru	r amend	ed schedules. M	laking a false state	ement, concealing property, or 10, or imprisonment for up to 20
Sig	n Below					
Did you pa	ay or agree to pay some	one who is NOT an attorne	y to help	you fill out ban	kruptcy forms?	
■ No						
☐ Yes.	Name of person					kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summa	ary and s	schedules filed v	with this declaration	on and
X /s/ And	drew John Marshall		Х			
	w John Marshall are of Debtor 1		_	Signature of De	ebtor 2	
Date	October 19, 2022			Date		

	l in this inforn	nation to identify you	r case:			
De	ebtor 1	Andrew John Ma	Arshall  Middle Name	Last Name		
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
.		nkruptcy Court for the:	DISTRICT OF MINNESO			
Ca	ise number					
(if known)					-	Check if this is an mended filing
0	fficial Fo	rm 107				
St	atement	of Financial	Affairs for Individ	luals Filing for B	ankruptcy	04/22
info	ormation. If m	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup y additional pages, write you	
			rital Status and Where You	Lived Before		
1.	wnat is your	current marital statu	IS?			
	<ul><li>■ Married</li><li>■ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
<b>3.</b> sta					ity property state or territory ico, Texas, Washington and W	
	■ No					
	_	ke sure you fill out Scl	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	l amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	III businesses, including part-		ıdar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,423.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

not include payments to an attorney for this bankruptcy case.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No.

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

<sup>\*</sup> Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	nyment for			
	Scheels Visa	1200	\$0.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other				
	Fleet Farm Visa	300 x 3 = 900	\$0.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other_	ard payment			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No  Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cost  No Yes. List all payments to an insider	igned by an insider.	ments or transfer a	ny property on ac	ccount of a d	ebt that benefited an			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name			
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures							
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
10.	Check all that apply and fill in the details below  No. Go to line 11.		erty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?			
	☐ Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date		Value of the			
		Explain what happened	d			property			

Case number (if known)

Debtor 1 Andrew John Marshall

11.	Within 90 days before you filed for banks accounts or refuse to make a payment b  No  Yes. Fill in the details.		did any creditor, including a bank or financial in you owed a debt?	stitution, set off any a	amounts from your
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, of □ No □ Yes		as any of your property in the possession of an er official?	assignee for the bend	efit of creditors, a
Pai	rt 5: List Certain Gifts and Contribution	ns			
13.	■ No □ Yes. Fill in the details for each gift.		did you give any gifts with a total value of more t		
	Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
14.	Address:  Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a totation.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers	rs			
16.	consulted about seeking bankruptcy or	prepari	id you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Abacus Credit Counseling				\$15.00
	Sage Personal Financial Mgmt				\$15.00

Case number (if known)

Debtor 1 Andrew John Marshall

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment					
	CIN Legal					\$10.00				
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No Yes. Fill in the details.	s or to make payment			r transfer any proper	ty to anyone who				
	Person Who Was Paid Address	Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment				
18.	<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proper include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>									
	Person Who Received Transfer Address		Description and value of property transferred payments paid in experience page 2.			Date transfer was made				
	Person's relationship to you									
	Brother	1996 Chevy Tru exchange for w								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes Fill in the details									
	Yes. Fill in the details.  Name of trust	, al	Date Transfer was							
	Name of trust	Description and	value of the prope	ity transierie	eu	made				
Par	List of Certain Financial Accounts, Ins	truments, Safe Deposi	it Boxes, and Stor	age Units						
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated in the second seco	r other financial accou	ınts; certificates o							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accouninstrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	r bankruptcy, any	safe deposit	box or other deposi	tory for securities,				
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		escribe the c	contents	Do you still have it?				

22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	□ No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?						
	Storage Unit		Christmas decorations,	□ No						
			household items, Harley, misc. tools, snowboard	■ Yes						
Par	9: Identify Property You Hold or Control for	r Someone Else								
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing for	, or hold in trust						
	■ No									
	Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	10: Give Details About Environmental Inform	nation								
For	he purpose of Part 10, the following definitions	s apply:								
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun	<u> </u>							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	law, whether you now own, operate,	or utilize it or used						
	<i>Hazardous material</i> means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,						
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.							
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environm	ental law?						
	No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of an	y release of hazardous material?								
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and TIR Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admin	ZIP Code) istrative proceeding under any env	ironmental law? Include settlements	and orders.						
	■ No □ Yes. Fill in the details.									
	Case Title	Court or agency	Nature of the case	Status of the						
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	Talairo of the odde	case						

Pa	rt 11:	Give Details About Your Business or	Connections to Any Business	
27.	With	nin 4 years before you filed for bankrup	tcy, did you own a business or have any of	the following connections to any business?
		lacksquare A sole proprietor or self-employed	in a trade, profession, or other activity, eith	ner full-time or part-time
		☐ A member of a limited liability com	pany (LLC) or limited liability partnership (l	LLP)
		☐ A partner in a partnership		
		☐ An officer, director, or managing ex	xecutive of a corporation	
		☐ An owner of at least 5% of the votil	ng or equity securities of a corporation	
		No. None of the above applies. Go to	Part 12.	
		Yes. Check all that apply above and fi	Il in the details below for each business.	
		siness Name	Describe the nature of the business	Employer Identification number
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
				Dates business existed
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.  No  Yes. Fill in the details below.	tcy, did you give a financial statement to a	nyone about your business? Include all financial
		me dress nber, Street, City, State and ZIP Code)	Date Issued	
Pa	rt 12:	Sign Below		
are with 18 U	true a n a ba J.S.C And	and correct. I understand that making a ankruptcy case can result in fines up to . §§ 152, 1341, 1519, and 3571. rew John Marshall		declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
		v John Marshall re of Debtor 1	Signature of Debtor 2	
Da	te _(	October 19, 2022	Date	
■ N	√o ∕es	, ,	ent of Financial Affairs for Individuals Filin	,
<b>1</b>	No		ot an attorney to help you fill out bankrupto	

Case number (if known)

Debtor 1 Andrew John Marshall

## **United States Bankruptcy Court District of Minnesota**

In re	Andrew John Marshall				Case No.	
	Debto	r(s)			Chapter	13
	DISCLOSURE OF COMPENSATION	OF.	A	ATTORNEY	FOR D	EBTOR
paid t	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
Prior	egal Services, I have agreed to accept to the filing of this statement I have received ace Due	\$ \$ \$	_	3,000.00 0.00 3,000.00		
	The source of the compensation paid to me was:  Debtor  Debtor  Other (specify)	)				
3. Т	The source of the compensation to be paid to me is:  Debtor  Other (specify)	)				
	I have not agreed to share the above-disclosed compensates of my law firm.	tion	1 V	with any othe	r person u	inless they are members and
associ	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people or entities sharing in the compensation, is attached.					
	In return for the above-disclosed fee, together with such fed by 11 U.S.C. §528(a)(1), I have agreed to render legal se					
	Analysis of the debtor's financial situation, and rendering tetition in bankruptcy;	ng a	ad	vice to the d	ebtor in d	etermining whether to file a
k	Preparation and filing of any petition, schedules, statemen	nts o	of	affairs and p	an which	may be required;
	Representation of the debtor at the meeting of creditors hereof;	s and	ıd	confirmation	hearing,	and any adjourned hearings
c	Representation of the debtor in contested bankruptcy mat	ters;	; 8	and		
e	Other services reasonably necessary to represent the debt	or(s)	.).			

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the best of my knowledge.

### **CERTIFICATION**

	Wesley W. Scott 0264787
	/s/ Wesley W. Scott
Dated: October 13, 2022	Signature of Attorney
Dated: <b>October 19, 2022</b>	Cianatura of Attamay
statement of any agreement or arrangement for payn	nent to me for representation of the debtor(s) in this bankruptcy case.
I certify that the foregoing, together with the	e written contract required by 11 U.S.C. §528(a)(1), is a complete

Fill in this information to identify your case:				
Debtor 1	Andrew John Marshall			
Debtor 2 (Spouse, if filing)				
United States B	sankruptcy Court for the: District of Minnesota			
Case number (if known)				

Check as directed in lines 17 and 21:					
According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check one only.								
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married. Fill out both Columns A and B, lines 2-11.								
10 the	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.								
					Colui Debt		Column B Debtor 2 or non-filing spouse		
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	, and co	mmissi	ons (before all	\$	3,063.75	\$		
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.				\$	0.00	\$		
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	<b>t.</b> Include ld, your c	e regulai depende	contributions nts, parents,	\$	0.00	\$		
5.	Net income from operating a business, profession, or farm	Debtor	1						
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00						
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	• \$	0.00	\$		
6.	Net income from rental and other real property	Debtor							
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$_	0.00	0	•	0.00	Φ.		
1	Net monthly income from rental or other real property	\$	0.00	Copy here ->	• \$	0.00	\$		

					Column A Debtor 1		Column B Debtor 2 o			
7.	Interest, c	dividends, and royalties			\$	0.00	\$			
8.	Unemploy	yment compensation			\$	0.00	\$			
		ter the amount if you contend that the a Security Act. Instead, list it here:		enefit under						
	For you		\$	0.00						
	For you	r spouse	\$							
9.	benefit und not include United Sta disability, of pay paid undoes not es	or retirement income. Do not include a der the Social Security Act. Also, except any compensation, pension, pay, annutes Government in connection with a door death of a member of the uniformed under chapter 61 of title 10, then include exceed the amount of retired pay to which any provision of title 10 other than	at as stated in the next se uity, or allowance paid by isability, combat-related i services. If you received that pay only to the exte th you would otherwise b	ntence, do	\$	0.00	\$			
10.	Do not inc received a domestic t United Sta disability,	om all other sources not listed above lude any benefits received under the Sous a victim of a war crime, a crime again terrorism; or compensation, pension, pates Government in connection with a door death of a member of the uniformed in a separate page and put the total belo	ocial Security Act; payments thumanity, or internationly, annuity, or allowance is ability, combat-related is services. If necessary, lis	ents onal or paid by the njury or						
					\$	0.00	\$			
					\$	0.00	\$			
	Т	otal amounts from separate pages, if a	ny.	+	\$	0.00	\$			
11.		your total average monthly income. nn. Then add the total for Column A to		\$	3,063.75	+ \$			3,063.75	
art	2: Det	termine How to Measure Your Deduc	tions from Income					mo	nthly income	1
12. 13.	Copy you	r total average monthly income from the marital adjustment. Check one:	line 11.					\$	3,063.75	5_
	■ You a	are not married. Fill in 0 below.								
		are married and your spouse is filing wi	th you. Fill in 0 below.							
	You a Fill in depe	are married and your spouse is not filing the amount of the income listed in line ndents, such as payment of the spouse w, specify the basis for excluding this in strents on a separate page.	g with you. 11, Column B, that was I 's tax liability or the spou	se's suppo	rt of someor	ne other	than you or you	ır depende	ents.	
	If this	adjustment does not apply, enter 0 be	low.							
				\$						
				\$						
		Total		\$	0.0	00	Copy here=>		0.	.00
14.	Your cur	rrent monthly income. Subtract line 1	3 from line 12.					\$	3,063.75	5
15.		e your current monthly income for thopy line 14 here=>	e year. Follow these ste	eps:				\$	3,063.75	5

Debtor 1		Andrew John Marshall			Case number (if known)					
		N	Multiply line 15a by 12 (the number of months					<b>x</b> 12		
	15	b. T	he result is your current monthly income for the	ne year for tl	his part of th	ne form		\$_	36,765.00	
16.	Calo	culat	e the median family income that applies to	you. Follow	v these step	s:				
	16a	. Fill	in the state in which you live.	MI	N					
	16b	. Fill	in the number of people in your household.	1						
47		To t	in the median family income for your state and find a list of applicable median income amoun ructions for this form. This list may also be avaithe lines compare?	ts, go online	using the I		eparate	\$_	65,514.00	
17.			•				. 5			
	17a.		Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do							
	17b.	. [	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14	ulation of '						
Part	3:	С	alculate Your Commitment Period Under 11	U.S.C. § 1	325(b)(4)					
18.	Сор	у уо	ur total average monthly income from line	11				\$	3,063.75	
19.	cont	tend	the marital adjustment if it applies. If you are that calculating the commitment period under income, copy the amount from line 13.	e married, y 11 U.S.C. §	our spouse 1325(b)(4)	is not filing with you allows you to deduc	, and you it part of your			
	19a	. If th	e marital adjustment does not apply, fill in 0 o	n line 19a.				-\$	0.00	
	19b.	. Suk	otract line 19a from line 18.					\$	3,063.75	
20.	Cald	culat	e your current monthly income for the year	. Follow the	ese steps:				0.000.75	
	20a	. Cop	by line 19b					\$_	3,063.75	
		Mul	tiply by 12 (the number of months in a year).						<b>x</b> 12	
	20b.	. The	result is your current monthly income for the	year for this	part of the	form		\$_	36,765.00	
	20c.	. Cop	by the median family income for your state and	I size of hou	usehold fron	n line 16c		\$_	65,514.00	
	21.	Hov	w do the lines compare?						J	
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	vise ordered	I by the cou	rt, on the top of page	1 of this form, chec	ck box 3,	The commitment	
			Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless other	wise ordere	d by the court, on the	e top of page 1 of th	is form, c	heck box 4, The	
Part X	By s  ( /s/ Ar  Sig	ignir Andre Ignatu	ign Below  In the second state of the second	the informa	ation on this	statement and in an	y attachments is true	e and cor	rect.	
	If yo	u ch	ecked 17a, do NOT fill out or file Form 122C-2	2.						

Debtor 1	Andrew John Marshall	Case number (if known)	

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court District of Minnesota

In re	Andrew John Marshall		Case No.		
		Debtor(s)	Chapter	13	
	VER	FICATION OF CREDITOR M	ATRIX		
Γhe ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and corr	rect to the best	of his/her knowledge.	
Date:	October 19, 2022	/s/ Andrew John Marshall			
		Andrew John Marshall			
		Signature of Debtor			

ADVANTAGE COLLECTION 495 2ND AVE SE CAMBRIDGE MN 55008

ALLINA HEALTH
PO BOX 77008
MINNEAPOLIS MN 55480

ALLINA HEALTH 2925 CHICAGO AVE MINNEAPOLIS MN 55407

AMEX
CORRESPONDENCE/BANKRUPTCY
PO BOX 981540
EL PASO TX 79998

BANK OF AMERICA ATTN: BANKRUPTCY 4909 SAVARESE CIRCLE TAMPA FL 33634

CARECREDIT
PO BOX 960061
ORLANDO FL 32896-0061

CARECREDIT SYNCHRONY BANK PO BOX 960061 ORLANDO FL 32896

CENTERPOINT ENERGY PO BOX 1144 MINNEAPOLIS MN 55440-1144

CENTRACARE 1406 6TH AVE N SAINT CLOUD MN 56303-1901 DEANNE MARIE MARSHALL 687 BRIANNA DRIVE UNIT 2 SARTELL MN 56377

DELATA DENTAL OF MN 500 WASHINGTON AVE S. SUITE 2060 MINNEAPOLIS MN 55415

FIRST NATIONAL BANK ATTN: BANKRUPTCY P.O. BOX 3128 OMAHA NE 68103

FNBO PO BOX 3331 OMAHA NE 68103

HCMC PO BOX 1238 MINNEAPOLIS MN 55440

IHEALTH
PO BOX 860596
MINNEAPOLIS MN 55486

INFINITE HEALTH COLLABORATIVE PO BOX 860596 MINNEAPOLIS MN 55480

INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY PO BOX 7346 PHILADELPHIA PA 19101-7346

MIDWEST RADIOLOGY PO BOX 1259 DEPT. #16597 OAKS PA 19456 MN DEPT OF REVENUE ATTN: DENISE JONES PO BOX 64447 SAINT PAUL MN 55164-0047

MNGI PO BOX 14829 MINNEAPOLIS MN 55414

NAVIENT SOLUTIONS INC ATTN: BANKRUPTCY P.O. BOX 9500 WILKES-BARRE PA 18773

PATHLIGHT PROPERTY MANAGMENT 6500 INTERNATIONAL PKWY SUITE 100 PLANO TX 75093

RELIANCE RECOVERIES PO BOX 29227 MINNEAPOLIS MN 55429

SAINT CLOUD CREDIT UNION ATTN: BANKRUPTCY 3030 1ST STREET SOUTH SAINT CLOUD MN 56301

STATE FARM PAYMENT PLAN PO BOX 52265 PHOENIX AZ 85072

SYNCB/MILLS FLEET FARM ATTN: BANKRUPTCY PO BOX 965060 ORLANDO FL 32896

SYNCHRONY BANK/CARE CREDIT ATTN: BANKRUPTCY DEPT PO BOX 965064 ORLANDO FL 32896

VERIZON WIRELESS BK ADMIN 500 TECHNOLOGY DRIVE SUITE 550 WELDON SPRINGS MO 63304